



Administration 797-1030
 Administrative Services 797-1029
 Budget & Finance 797-1050
 Community Services 797-1145
 Development Services 797-2076

Engineering 797-1070
 Fire Department 797-1050
 Police Department 797-1200
 Public Works 797-1240
 Utilities 433-1000

TOWN OF DAVIE 6591 SW 45th Street, Davie, Florida 33314-3399

(305) 797-1000

DATE December 2, 1999

NAME OF ORGANIZATION Hawkes Bluff Elementary School

ADDRESS 5900 S. W. 160 Avenue Davie, FL 33331

CITY STATE ZIP

NAME OF REPRESENTATIVE OF ORGANIZATION Jane Coffman, Principal

ADDRESS 5900 S. W. 160 Avenue Davie FL 33331

CITY STATE ZIP

PHONE NUMBER 680-1177 NUMBER OF ENTRANTS IN PARADE 1,200

DATE OF PARADE February 24, 2000 HOURS OF PARADE 8:30 a.m. TO 10:00 a.m.

PARADE ROUTE See attached.

Applicant's Signature *Jane Coffman*

COUNCIL MEETING DATE 1/19/2000

APPROVED

DENIED

NOTE: Per Section 21-4 of the Town Code, The council shall be the sole authority for the approval of permits to conduct parades on or about the public rights-of-way of the town. The civic organization making application to conduct such parade shall have the sole responsibility and prerogative to determine who the participants and/or participating organizations shall be. Permits shall be granted subject to Federal, State and Town of Davie laws.

THE TOWN OF DAVIE REQUIRES A CERTIFICATE OF INSURANCE OF NO LESS THAN \$1,000,000 NAMING THE TOWN OF DAVIE AS AN ADDITIONAL INSURED.

An Equal Opportunity Employer

HAWKES BLUFF HEART RUN/WALK PERMISSION FORM



January 19, 2000

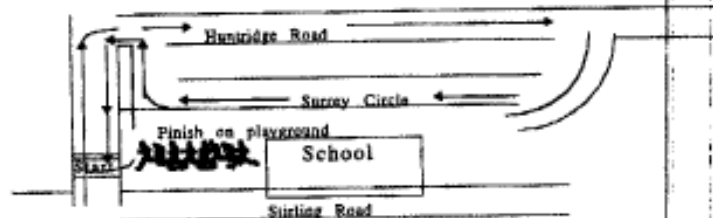
Dear Parent,

On Thursday, February 24, 2000, at 8:30 a.m., students at Hawkes Bluff Elementary School will take part in a one mile, off-campus **HEART RUN/WALK**. This is a voluntary activity with an emphasis on finishing the mile. As a lead-up to this event, we have been stressing the importance of trying to develop and maintain a strong, healthy heart.

The route for the **HEART RUN/WALK** is shown below. In order to ensure a safe environment, the Davie Police Department will block off the run/walk area.

If you would like for your child to take part in the **HEART RUN/WALK**, please fill out the permission form and return it by Friday, February 17, 2000.

HEART RUN/WALK ROUTE



RETURN TO YOUR CHILD'S TEACHER



HEART RUN/WALK PERMISSION FORM

My child, _____, has my permission to take part in the Hawkes Bluff Elementary School one mile **HEART RUN/WALK**.

Parent's _____

signature

Teacher _____

THIS FORM MUST BE RETURNED TO SCHOOL IN ORDER FOR YOUR CHILD TO PARTICIPATE ON FEBRUARY 17, 2000.